

04 APR 2007

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. <i>10591442.</i>	FILING DATE					
							APPLICANT(S)						
CLAIMS													
	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT			AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/				51						
2	/		/				52						
3	/		/				53						
4	/		/				54						
5	/		/				55						
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40	/						90						
41	/						91						
42	/						92						
43	/						93						
44	/						94						
45	/						95						
46	/						96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	3						TOTAL IND.						
TOTAL DEP.	43						TOTAL DEP.						
TOTAL CLAIMS	46						TOTAL CLAIMS						

3 ↓ 3 ↓ ↓

43 ← 17 ← ←

46 [REDACTED] 20 [REDACTED]